

**Part 1 CHANGE YOUR HOME MAILING ADDRESS**

Individual income tax returns (Forms IR-25J, IR-21J, IR-18J etc.)

- If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here.....

1. <b>Your name</b> (first name, middle initial and last name)	1a. <b>Your Social Security Number</b>		
2. <b>Spouse's name</b> (first name, middle initial and last name)	2a. <b>Spouse's Social Security Number</b>		
3. <b>Prior name(s)</b>			
4. <b>Old address</b> (number, street, city or town, state and zip code)	Apt. No.		
5. <b>New address</b> (number, street, city or town, state and zip code)	<table style="width:100%; border: none;"> <tr> <td style="width:60%; border: none;">Apt. No.</td> <td style="width:40%; border: none;">Date of move</td> </tr> </table>	Apt. No.	Date of move
Apt. No.	Date of move		

**Part 2 CHANGE YOUR BUSINESS MAILING ADDRESS OR BUSINESS LOCATION**

Check all boxes this change affects:

- 6.  **Business net profit returns** (Forms BR-25J, BR-21J, BR-18J etc.)
- 7.  **Employer withholding returns** (Forms IT-11J, IT-13J, IT-15J etc.)
- 8.  **Business location**

9. <b>Business name</b>	9a. <b>EIN/FID Number</b>						
10. <b>Old mailing address</b> (number, street, city or town, state and zip code)	Room or Suite no.						
11. <b>New mailing address</b> (number, street, city or town, state and zip code)	<table style="width:100%; border: none;"> <tr> <td style="width:15%; border: none;">Room or suite No.</td> <td style="width:25%; border: none;">Date of move</td> <td style="width:60%; border: none;">New telephone number (    )</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;">New fax number (    )</td> </tr> </table>	Room or suite No.	Date of move	New telephone number (    )			New fax number (    )
Room or suite No.	Date of move	New telephone number (    )					
		New fax number (    )					

**Part 3 SIGNATURE**

Daytime telephone number of person to contact (optional) ▶ (    ) \_\_\_\_\_

<p><b>Sign Here</b> ▶ _____   _____                  Your signature   Date</p> <p>▶ If joint return, spouse's signature   _____                    Date</p>	<p>▶ _____   _____                  If Part 2 completed, signature of owner, officer or representative   Date</p> <p>▶ _____   _____                    Title</p>
---	---